# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF NEW MEXICO

LORI CHURCHWELL,

Plaintiff,

v. No.

METROPOLITAN LIFE INSURANCE COMPANY,

Defendant.

# PLAINTIFF'S ORIGINAL COMPLAINT

## PRELIMINARY STATEMENT

1. Plaintiff LORI CHURCHWELL, hereinafter referred to as "Plaintiff," brings this ERISA action against Metropolitan Life Insurance Company, in its capacity as Administrator of the Sandia Laboratory Federal Credit Union Long Term Disability Plan, hereinafter referred to as "Defendant". Plaintiff brings this action to secure all disability benefits, whether they be described as short term, long term and/or waiver of premium claims to which Plaintiff is entitled under a disability insurance policy underwritten and administered by Defendant. Plaintiff is covered under the policy by virtue of her employment with Sandia Laboratory Federal Credit Union.

## **PARTIES**

- 2. Plaintiff is a citizen and resident of Albuquerque, New Mexico.
- 3. Defendant is a properly organized business entity doing business in the State of New Mexico.

- 4. The disability plan at issue in the case at bar was funded and administered by Defendant.
- 5. Defendant is a business entity doing business in the District of New Mexico. Defendant may be served with process by serving its registered agent, C T Corporation System, 206 South Coronado Avenue, Española, New Mexico 87532-2792.

## JURISDICTION AND VENUE

- 6. This court has jurisdiction to hear this claim pursuant to 28 U.S.C. ' 1331, in that the claim arises under the laws of the United States of America. Specifically, Plaintiff brings this action to enforce her rights under section 502(a)(1)(B) of the Employee Retirement Income Security Act, (ERISA), which provides "[a] civil action may be brought . . . (1) by a participant or by a beneficiary . . . (B) to recover benefits due to him under the terms of his plan, to enforce his rights under the terms of the plan, or to clarify his rights to future benefits under the terms of the plan." 29 U.S.C. § 1132(a)(1)(B).
- 7. Venue in the District of New Mexico is proper by virtue of Defendant doing business in the District of New Mexico. Under the ERISA statute, venue is proper "in the district where the plan is administered, where the breach took place, or where a defendant resides or may be found." 29 U.S.C. § 1132(e)(2). Therefore, venue may also be proper under the third prong of ERISA's venue provision, specifically "where a defendant resides or may be found." (*Id.*) Here, Defendant is "found" within the District of New Mexico, as it does business here, and the court has personal jurisdiction over

Defendant, as it has sufficient ties to the United States.

## CONTRACTUAL AND FIDUCIARY RELATIONSHIP

- 8. Plaintiff has been a covered beneficiary under a group disability benefits policy issued by Defendant at all times relevant to this action. Said policy became effective January 1, 2014.
- 9. The disability policy at issue was obtained by Plaintiff by virtue of Plaintiff's employment with Sandia Laboratory Federal Credit Union at the time of Plaintiff's onset of disability.
- 10. Under the terms of the policy, Defendant administered the Plan and retained the sole authority to grant or deny benefits to applicants.
  - 11. Defendant funds the Plan benefits.
- 12. Because the Defendant both funds the Plan benefits and retains the sole authority to grant or deny benefits, Defendant has an inherent conflict of interest.
- 13. Because of the conflict of interest described above, this Court should consider Defendant's decision to deny disability benefits as an important factor during its review in determining Defendant's abuse of discretion.
- 14. Further, in order for the Plan Administrator's decisions to be reviewed by this Court under an "arbitrary and capricious" standard, the Plan must properly give the Plan Administrator "discretion" to make said decisions within the plain language in the Plan.
- 15. Defendant has a fiduciary obligation to administer the Plan fairly and to furnish disability benefits according to the terms of the Plan.

### **ADMINISTRATIVE APPEAL**

- 16. Plaintiff is a 57 year old woman previously employed by Sandia Laboratory Federal Credit Union as a "Fraud and Forgery Specialist."
- 17. Fraud and Forgery Specialist is classified under the Dictionary of Occupational Titles as Sedentary with an SVP of 5 and considered to be skilled work.
- 18. Due to Plaintiff's disabling conditions, Plaintiff ceased actively working on February 26, 2016 as on this date Plaintiff suffered from depression, stress, migraine headaches, fibromyalgia, fatigue, chronic pain, and sleep disturbance.
  - 19. Plaintiff alleges that she became disabled on February 27, 2016.
- 20. Plaintiff filed for short term disability benefits with Defendant on May 5, 2016.
  - 21. Short term disability benefits were granted.
- 22. Plaintiff filed for long term disability benefits through the Plan administered by the Defendant.
- 23. Defendant denied long term disability benefits under the Plan. Said letter allowed Plaintiff 180 days to appeal this decision.
- 24. At the time Defendant denied Plaintiff long term disability benefits, the disability standard in effect pursuant to the Plan was that Plaintiff must be considered unable to perform her "Own Occupation."
  - 25. If granted the Plan would pay monthly benefit of \$2,317.12.
- 26. Plaintiff pursued her administrative remedies set forth in the Plan by requesting administrative review of the denial of benefits.

- 27. Plaintiff timely perfected her administrative appeal pursuant to the Plan by sending letter requesting same to the Defendant.
- 28. Plaintiff submitted additional information including medical records to show that she is totally disabled from the performance of both her own and any other occupation as defined by the Plan.
- 29. Additionally, the Social Security Administration issued a fully favorable decision on Plaintiff's claim for disability benefits under Title II and Title XVI of the Social Security Act, finding that Plaintiff is "disabled" during the relevant time period. Notably, the SSA's definition of disability is significantly more restrictive than Defendant's as they require the claimant to be unable to work in "any occupation in the National Economy."
- 30. Defendant was provided documentation of the Social Security Administration's finding that Plaintiff was found to be totally disabled under Title II and Title XVI of the Social Security Act.
- 31. On or about August 11, 2016, Defendant's paid consultant, Lori Steera, RN, CRRN, CCM, nurse consultant, performed a paper review of Plaintiff's claim file.
- 32. On or about June 21, 2017, Defendant's paid consultant, Marcus Goldman, M.D., psychiatry, performed a paper review of Plaintiff's claim file.
- 33. On or about June 23, 2017, Defendant's paid consultant, Tracey Schmidt, M.D., internal medicine and rheumatology, performed a paper review of Plaintiff's claim file.
  - 34. On or about July 10, 2017, Defendant's paid consultant, Marcus

Goldman, M.D., psychiatry, prepared an addendum to his paper review of Plaintiff's claim file.

- 35. Defendant's consultants completed their reports without examining Plaintiff.
- 36. On September 8, 2017, Defendant notified Plaintiff that Defendant affirmed its original decision to deny Plaintiff's claim for long term disability benefits.
- 37. Defendant also notified Plaintiff on September 8, 2017 that Plaintiff had exhausted her administrative remedies.
- 38. Defendant, in its final denial, discounted the opinions of Plaintiff's treating physicians, among others, and the documented limitations from which Plaintiff suffers including the effects of Plaintiff's impairments on her ability to engage in work activities.
- 39. Plaintiff has now exhausted her administrative remedies, and her claim is ripe for judicial review pursuant to 29 U.S.C. § 1132.

### MEDICAL FACTS

- 40. Plaintiff suffers from multiple medical conditions resulting in both exertional and nonexertional impairments.
- 41. Plaintiff suffers from chronic pain, fibromyalgia, depression, stress migraine headaches, sleep disturbance, fatigue, spondylosis of the cervical and lumbar spine, connective tissue disease, constipation and diarrhea, and degenerative disc disease (DDD).
- 42. Treating physicians document continued chronic back pain, radicular symptoms, as well as decreased range of motion and weakness.

- 43. Plaintiff's multiple disorders have resulted in restrictions in activity, have severely limited Plaintiff's range of motion, and have significantly curtailed her ability to engage in any form of exertional activity.
- 44. Further, Plaintiff's physical impairments have resulted in chronic pain and discomfort.
- 45. Plaintiff's treating physicians document these symptoms. Plaintiff does not assert that she suffers from said symptoms based solely on her own subjective allegations.
- 46. Physicians have prescribed Plaintiff with multiple medications, including narcotic pain relievers, in an effort to address her multiple symptoms.
- 47. However, Plaintiff continues to suffer from breakthrough pain, discomfort, and limitations in functioning, as documented throughout the administrative record.
- 48. Plaintiff's documented pain is so severe that it impairs her ability to maintain the pace, persistence and concentration required to maintain competitive employment on a full time basis, meaning an 8 hour day, day after day, week after week, month after month.
- 49. Plaintiff's medications cause additional side effects in the form of sedation and cognitive difficulties.
- 50. The aforementioned impairments and their symptoms preclude Plaintiff's performance of any work activities on a consistent basis.
- 51. As such, Plaintiff has been and remains disabled per the terms of the Plan and has sought disability benefits pursuant to said Plan.

52. However, after exhausting her administrative remedies, Defendant persists in denying Plaintiff her rightfully owed disability benefits.

## **DEFENDANT'S CONFLICT OF INTEREST**

- 53. At all relevant times, Defendant has been operating under an inherent and structural conflict of interest as Defendant is liable for benefit payments due to Plaintiff and each payment depletes Defendant's assets.
  - 54. Defendant's determination was influenced by its conflict of interest.
- 55. Defendant has failed to take active steps to reduce potential bias and to promote accuracy of its benefits determinations.
- 56. The long term disability Plan gave Defendant the right to have Plaintiff submit to a physical examination at the appeal level.
- 57. A physical examination, with a full file review, provides an evaluator with more information than a medical file review alone.
  - 58. More information promotes accurate claims assessment.
- 59. Despite having the right to a physical examination, Defendant did not ask Plaintiff to submit to one.

### **COUNT I:**

# WRONGFUL DENIAL OF BENEFITS UNDER ERISA, 29 U.S.C. § 1132

- 60. Plaintiff incorporates those allegations contained in paragraphs 1 through 59 as though set forth at length herein.
- 61. Defendant has wrongfully denied disability benefits to Plaintiff in violation of Plan provisions and ERISA for the following reasons:
  - a. Plaintiff is totally disabled, in that she cannot perform the material

duties of her own occupation, and she cannot perform the material duties of any other occupation which her medical condition, education, training, or experience would reasonably allow;

- b. Defendant failed to afford proper weight to the evidence in the administrative record showing that Plaintiff is totally disabled;
- c. Defendant's interpretation of the definition of disability contained in the policy is contrary to the plain language of the policy, as it is unreasonable, arbitrary, and capricious; and
- d. Defendant has violated its contractual obligation to furnish disability benefits to Plaintiff.

## **COUNT II: ATTORNEY FEES AND COSTS**

- 62. Plaintiff repeats and realleges the allegations of paragraphs 1 through 61 above.
- 63. By reason of the Defendant's failure to pay Plaintiff benefits as due under the terms of the Plan, Plaintiff has been forced to retain attorneys to recover such benefits, for which Plaintiff has and will continue to incur attorney's fees. Plaintiff is entitled to recover reasonable attorney's fees and costs of this action, pursuant to Section 502(g)(1) of ERISA, 29 U.S.C. §1132(g)(1).

# WHEREFORE, Plaintiff demands judgment for the following:

- A. Grant Plaintiff declaratory relief, finding that she is entitled to all past due short term and long term disability benefits yet unpaid;
  - B. Order Defendant to pay past short term and long term disability benefits

retroactive to August 25, 2016 to the present in the monthly amount specified in the

Plan and subject to such offsets as are permitted in the Plan, plus pre-judgment

interest:

Order Defendant to remand claim for future administrative review and C.

continue to make future long term disability benefits in the monthly amount specified in

the Plan and subject to such offsets as are permitted in the Plan until such time as

Defendant makes an adverse determination of long-term disability consistent with

ERISA and Plaintiff's entitlements under the Plan;

Order Defendant to pay for the costs of this action and Plaintiff's D.

attorney's fees, pursuant to Section 502(g) of ERISA, 29 U.S.C. § 1132(g); and

E. For such other relief as may be deemed just and proper by the Court.

Dated: Houston, Texas November 7, 2018

Respectfully submitted,

By:

/s/ Derek L. Weems\_

Derek L. Weems

**DORATO & WEEMS LLC** 

118 Wellesley Dr. SE Albuquerque, NM 87106

Telephone: 505-314-8880

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ATTORNEYS FOR PLAINTIFF

/s/ Britney Anne Heath McDonald

Britney Anne Heath McDonald

Tex. Bar. No. 24083158 Fed. I.D. No. 2621983

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Houston, Texas 77007 Telephone: 713-228-8888 Facsimile: 855-842-2860 ATTORNEY-IN-CHARGE FOR PLAINTIFF, LORI CHURCHWELL JS 44 (Rev. 12/12)

## **CIVIL COVER SHEET**

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil declerk sheet. (SEP INSTRUCTIONS ON NEXT PAGE OF THIS EARLY)

purpose of initiating the civil do	ocket sheet. (SEE INSTRUC	TIONS ON NEXT PAGE O	OF THIS FC	PRM.)								
I. (a) PLAINTIFFS Lori Churchwell				DEFENDANTS METROPOLITAN LIFE INSURANCE COMPANY								
(b) County of Residence of First Listed Plaintiff  (EXCEPT IN U.S. PLAINTIFF CASES)				County of Residence of First Listed Defendant  (IN U.S. PLAINTIFF CASES ONLY)  NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.								
(c) Attorneys (Firm Name, A Derek Weems, Dorato & Albuquerque, New Mexic	Weems LLC, 118 Wel	lesley Dr. SE,		Attorneys (If Know	wnj							
II. BASIS OF JURISDICTION (Place an "X" in One Box Only)				TIZENSHIP OF		NCI	PAL PAR	TIES				
☐ 1 U.S. Government Plaintiff	■ 3 Federal Question     (U.S. Government)		(For Diversity Cases Only)  PTF DEF  izen of This State  1									
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IV. NATURE OF SUIT	(Place an "X" in One Box On	ly)		ORFEITURE/PENALTS		-2221.6.			OTHER	onthony. Th	and a will be suit.	
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☐ 196 Franchise  REAL*PROPERTY ☐ 210 Land Condemnation ☐ 220 Foreclosure ☐ 230 Rent Lease & Ejectment ☐ 245 Tort broduct Liability ☐ 290 All Other Real Property	Injury  362 Personal Injury - Medical Malpractice  440 Other Civil Rights  441 Voting  442 Employment  443 Housing/ Accommodations  445 Amer. w/Disabilities -	Habeas Corpus: ☐ 463 Alien Detainee ☐ 510 Motions to Vacate Sentence ☐ 530 General	□ 79 <b>NS ⊠</b> 79	☐ 751 Family and Medical Leave Act ☐ 790 Other Labor Litigate ☑ 791 Employee Retiremen Income Security Act		870 T o 871 IF	ERALSTAX SI axes (U.S. Plai r Defendant) RS—Third Part 6 USC 7609	ntiff	Act  896 Arbitration  899 Administrative Proceded Act/Review or Appeal Agency Decision  950 Constitutionality of State Statutes			
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VI. CAUSE OF ACTIO	L29 USC 8 1132	tute under which you a use: penefits	re filing (A	Do not cite jurisdictional	l statutes	s unles.	s diversity):		<del></del>			
VII. REQUESTED IN CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.				DEMAND \$ CHECK YES only if demanded in complaint:  JURY DEMAND: ☐ Yes ☐ No								
VIII. RELATED CASE IF ANY	E(S) (See instructions):	JUDGE				DOC	KET NUMB	ER				
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JS 44 Reverse (Rev. 12/12)

## INSTRUCTIONS FOR ATTORNEYS COMPLETING CIVIL COVER SHEET FORM JS 44

Authority For Civil Cover Sheet

The JS 44 civil cover sheet and the information contained herein neither replaces nor supplements the filings and service of pleading or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. Consequently, a civil cover sheet is submitted to the Clerk of Court for each civil complaint filed. The attorney filing a case should complete the form as follows:

- I.(a) Plaintiffs-Defendants. Enter names (last, first, middle initial) of plaintiff and defendant. If the plaintiff or defendant is a government agency, use only the full name or standard abbreviations. If the plaintiff or defendant is an official within a government agency, identify first the agency and then the official, giving both name and title.
  - (b) County of Residence. For each civil case filed, except U.S. plaintiff cases, enter the name of the county where the first listed plaintiff resides at the time of filing. In U.S. plaintiff cases, enter the name of the county in which the first listed defendant resides at the time of filing. (NOTE: In land condemnation cases, the county of residence of the "defendant" is the location of the tract of land involved.)
  - (c) Attorneys. Enter the firm name, address, telephone number, and attorney of record. If there are several attorneys, list them on an attachment, noting in this section "(see attachment)".
- II. Jurisdiction. The basis of jurisdiction is set forth under Rule 8(a), F.R.Cv.P., which requires that jurisdictions be shown in pleadings. Place an "X" in one of the boxes. If there is more than one basis of jurisdiction, precedence is given in the order shown below. United States plaintiff. (1) Jurisdiction based on 28 U.S.C. 1345 and 1348. Suits by agencies and officers of the United States are included here. United States defendant. (2) When the plaintiff is suing the United States, its officers or agencies, place an "X" in this box. Federal question. (3) This refers to suits under 28 U.S.C. 1331, where jurisdiction arises under the Constitution of the United States, an amendment to the Constitution, an act of Congress or a treaty of the United States. In cases where the U.S. is a party, the U.S. plaintiff or defendant code takes precedence, and box 1 or 2 should be marked.

  Diversity of citizenship. (4) This refers to suits under 28 U.S.C. 1332, where parties are citizens of different states. When Box 4 is checked, the citizenship of the different parties must be checked. (See Section III below; NOTE: federal question actions take precedence over diversity cases.)
- III. Residence (citizenship) of Principal Parties. This section of the JS 44 is to be completed if diversity of citizenship was indicated above. Mark this section for each principal party.
- IV. Nature of Suit. Place an "X" in the appropriate box. If the nature of suit cannot be determined, be sure the cause of action, in Section VI below, is sufficient to enable the deputy clerk or the statistical clerk(s) in the Administrative Office to determine the nature of suit. If the cause fits more than one nature of suit, select the most definitive.
- V. Origin. Place an "X" in one of the six boxes.
  - Original Proceedings. (1) Cases which originate in the United States district courts.

Removed from State Court. (2) Proceedings initiated in state courts may be removed to the district courts under Title 28 U.S.C., Section 1441. When the petition for removal is granted, check this box.

Remanded from Appellate Court. (3) Check this box for cases remanded to the district court for further action. Use the date of remand as the filing date.

Reinstated or Reopened. (4) Check this box for cases reinstated or reopened in the district court. Use the reopening date as the filing date. Transferred from Another District. (5) For cases transferred under Title 28 U.S.C. Section 1404(a). Do not use this for within district transfers or multidistrict litigation transfers.

Multidistrict Litigation. (6) Check this box when a multidistrict case is transferred into the district under authority of Title 28 U.S.C. Section 1407. When this box is checked, do not check (5) above.

- VI. Cause of Action. Report the civil statute directly related to the cause of action and give a brief description of the cause. Do not cite jurisdictional statutes unless diversity. Example: U.S. Civil Statute: 47 USC 553 Brief Description: Unauthorized reception of cable service
- VII. Requested in Complaint. Class Action. Place an "X" in this box if you are filing a class action under Rule 23, F.R.Cv.P.

  Demand. In this space enter the actual dollar amount being demanded or indicate other demand, such as a preliminary injunction.

  Jury Demand. Check the appropriate box to indicate whether or not a jury is being demanded.
- VIII. Related Cases. This section of the JS 44 is used to reference related pending cases, if any. If there are related pending cases, insert the docket numbers and the corresponding judge names for such cases.

Date and Attorney Signature. Date and sign the civil cover sheet.